EV318279822

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PTO/SB/05 (11-00) Approved for use through 10/31/2002. OMB 0651-0032

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## UTILITY **PATENT APPLICATION**

Attomey Docket No. MI22-2246 First Inventor Janos Fucsko

TRANSMITTAL	Title Wet Etching Method of Removing Silicon From a
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No. EV 318279822 US
APPLICATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application
See MPEP chapter 600 concerning utility patent application contents.  1. X Fee Transmittal Form (e.g., PTO/SB/17) (w/check)  (Submit an original and a duplicate for fee processing)  Applicant claims small entity status.  See 37 CFR 1.27.  3. X Specification [Total Pages 25]  - Descriptive title of the invention Plus title  - Cross Reference to Related Applications  - Statement Regarding Fed sponsored R & D  - Reference to sequence listing, a table, or a computer program listing appendix  - Background of the Invention  - Brief Summary of the Invention  - Brief Description of the Drawings (if filed)  - Detailed Description	Washington, DC 20231  7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)  8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Form (CRF)  b. Specification Sequence Listing on:  i. CD-ROM or CD-R (2 copies); or  ii. paper  c. Statements verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  9. X Assignment Papers (cover sheet & document(s))
- Claim(s) - Abstract of the Disclosure Forma1  4.	10. 37 CFR 3.73(b) Statement  Power of  Attorney  11. English Translation Document (if applicable)  12. X Information Disclosure  Copies of IDS  Statement (IDS)/PTO-1449  Citations  13. Preliminary Amendment  14. X Return Receipt Postcard (MPEP 503)  (Should be specifically itemized)  15. Certified Copy of Priority Document(s)  (if foreign priority is claimed)  16. Request and Certification under 35 U.S.C. 122  (b)(2)(B)(i). Applicant must attach form PTO/SB/35  or its equivalent.  17. X Other: Return Receipt Postcard; Power
Box 5b, is considered a part of the disclosure of the accompanying continues the incorporation can only be relied upon when a portion has been inadver	uation or divisional application and is hereby incorporated by reference tently omitted from the submitted application parts.
Type of the second seco	Of Correspondence address helpw
Name Mark S. Matkin	
Wells St. John P.S.	
Address 601 West First Avenue, Suite 130	
Country Spokane	State WA Zip Code 99201-3828
Country	phone   509-624-4276   Fax   509-838-342
Name (Print/Type) Mark S. Matkin	Registration No. (Attorney/Agent) 32,268
Signature /	Date 7/22/03

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FEE TRANSMITTAL	C mplete if Known				
	Application Number	Unknown			
for FV 2003	Filing Date	Filed Herewith			

Patent fees are subject to annual revision.

Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$)1,582.00

C mplete if Known		
Application Number	Unknown	
Filing Date	Filed Herewith	
First Named Inventor	Janos Fucsko	
Examiner Name	Unknown	
Group / Art Unit	Unknown	
Attorney Docket No.	MI22-2246	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)				
1. X The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  3. ADDITIONAL FEES Large EntitySmall Entity					
Deposit Account Number 23-0925	Fee Fee Fee Code (\$) Fee Description	Fee Paid			
Number 23-0723	105 130 205 65 Surcharge - late filing fee or oath	0.00			
Deposit Account Name Wells St. John P.S.	127 50 227 25 Surcharge - late provisional filing fee or cover sheet.	0.00			
	139 130 139 130 Non-English specification	0.00			
X Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17	147 2,520 147 2,520 For filing a request for reexamination	0.00			
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action	0.00			
Check Money Other	113 1,840* 113 1,840* Requesting publication of SIR after Examiner action	0.00			
FEE CALCULATION	115 110 215 55 Extension for reply within first month	0.00			
1. BASIC FILING FEE	116 380 216 190 Extension for reply within second month	0.00			
Large Entity Small Entity	117 870 217 435 Extension for reply within third month	0.00			
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	118 1,360 218 680 Extension for reply within fourth month	0.00			
101 600 201 345 Littlibu filing for	128 1,850 228 925 Extension for reply within fifth month	0.00			
106 310 206 155 Design filling fee 750.00	119 300 219 150 Notice of Appeal	0.00			
107 480 207 240 Plant filing fee	120 300 220 150 Filing a brief in support of an appeal	0.00			
108 690 208 345 Reissue filing fee	121 260 221 130 Request for oral hearing	0.00			
114 150 214 75 Provisional filing fee	138 1,510 138 1,510 Petition to institute a public use proceeding	0.00			
SUBTOTAL (4) (6) 750 00	140 110 240 55 Petition to revive - unavoidable	0.00			
SUBTOTAL (1) (\$) 750.00	141 1,210 241 605 Petition to revive - unintentional	0.00			
2. EXTRA CLAIM FEES Fee from	142 1,210 242 605 Utility issue fee (or reissue)	0.00			
Ext <u>ra Claims below Fee Paid</u>	143 430 243 215 Design issue fee	0.00			
Total Claims 64 -20** = 44		0.00			
Claims Multiple Dependent  - 3** = 0	400 00 100 00	0.00			
**or number previously paid, if greater, For Reissues, see below	126 240 126 240	0.00			
Large Entity Small Entity	126 240 126 240 Submission of Information Disclosure Stmt	0.00			
Fee Fee Fee Fee Description Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)	40.00			
103 18 203 9 Claims in excess of 20	146 690 246 345 Filling a submission after final rejection				
102 78 202 39 Independent claims in excess of 3	(37 CFR § 1.129(a)) 149 690 249 345 For each additional invention to be	0.00			
104 260 204 130 Multiple dependent claim, if not paid	149 690 249 345 For each additional invention to be examined (37 CFR § 1.129(b))	0.00			
109 78 209 39 ** Reissue independent claims over original patent	Other fee (specify)	0.00			
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fee (specify)	0.00			
SUBTOTAL (2) (\$) 792.00	Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.				
SUBMITTED BY Complete (if applicable)					
Name (Print/Type) Monte C. Mon					
Signature Date 7/23/13					

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